

ms. 106

An Essay

on
Yellow Fever

Respectfully submitted to the Faculty

of the

Homœopathic Medical College
of Pennsylvania

for the

Degree of Doctor of Medicine

By

John J. Garvin

Philadelphia. — January 30th 1864

"Yellow Fever."

According to one of the rules of the college, a student offering himself for graduation, is expected to prepare and write a Thesis on some Medical subject, or on one of the many diseases to which the human family are liable.

In regard to the various diseases, all have been written upon and discussed by some of the most eminent Physicians both in this country and Europe. It can hardly be expected, that a student after a limited course of study, with but little experience in with disease, and in the practice of medicine is competent to advance many original ideas in regard to the form of the disease, its cause or treatment. He can only occasionally

throw in some thoughts of his own.

I propose to make "Yellow Fever" the subject for my Thesis. No doubt some one of the many students that have preceded me, may have used the same subject.

But as it is one of those diseases, making its appearance in this latitude at uncertain periods we should be well prepared to treat if possible more successfully than has been done, particularly by our friends of the "Old School". not only here, but in localities where it has prevailed year after year, as for instance, in the city of New Orleans.

"Old School" writers in their books give us a full account of the disease in all its stages but no reliable rule or guide in the treatment. With them it is nothing but guess work and a experiment. Each one will prescribe that remedy which

he in his judgment considers the most specific to the disease. If you ask them why they ^{use} a remedy, they are totally unable to give any satisfactory reason. Even in this late day if the fever should again make its appearance here, some, from the force of habit and a bad teaching in their younger days, would doubtless resort to that most barbarous of all treatments, that of venesection, during the high inflammatory fever that usually prevails in this disease; at the very time when it should be the object and aim of the Physician to save all the strength and vitality, to carry the patient successfully through this exhausting disease.

I had once the opportunity of witnessing an epidemic of this dreadful disease, and the treatment of it by both the "old school" and the

Homoeopathic." This occurred in Savannah
Geo: in 1854. "Yellow fever" made its
appearance in the city of Savannah in
month of August 1854. the first time
I believe in twenty years. Those first-
taken with the disease had all the
symptoms that those attacked usually
have in other parts of the United States
and other countries where it prevails.

It commenced in the first stage with
a feeling of weariness and lassitude,
and with severe pains in the head, back
and limbs; and sometimes slight chills
followed by fever with sickness of the
stomach. Another change soon occurred;
the fever increased, the skin became hot
and dry, the pulse hard and frequent,
the face flushed and swollen, the eyes
red and watery or highly inflamed.

The pain in the head, and distress

in the stomach increased followed by nausea and vomiting of bilious matters; the mouth and throat were dry, the tongue dry and swollen, and covered with whitish mucus, there was intense thirst;

There was generally a feeling of uneasiness and soreness in the epigastrium; the stomach was irritable, often throwing up every thing that was swallowed; There was great desire for water which if taken in large quantities was immediately rejected. The bowels were generally constipated and the discharges unhealthy and offensive; the urine was high colored and scanty. The pains in the head and back increased causing great pain and suffering to the patient, sometimes causing delirium. The symptoms in the first stage usually continued from twenty four to

forty eight hours or longer, when there was a remission of all the symptoms. The skin became more cool and moist, the pulse more natural; the patient feeling comparatively well except weakness and a slight uneasiness in the stomach, with occasional nausea and vomiting.

Sometimes gradual improvement took place, and the patient got well even in this early stage of the disease. But in the majority of cases there was soon a change for the worse.

The disease now took on what is called the second stage, which may be described as follows: The former symptoms making their appearance in a more aggravated form; there is increase of fever; the skin becomes hot and dry; and instead of the flushed and swollen face and redness of the eyes: we

have now a yellowness of the skin showing itself first behind the ears and on the forehead; then the eyeballs become yellow and have a glassy look; the color gradually spreading itself to the face neck and chest, and extending itself at length over the whole body. The patient has become more weakened and prostrated.

The pulse has also changed, instead of being hard and full; it is now weak irregular and feeble; the stomach is more irritable, and the vomiting returns in a more violent form, and the matter thrown up becomes thicker and darker.

The patient occasionally becomes delirious and springs out of bed, but falls from exhaustion; there is increased burning pain in the epigastric region; the thirst is excessive and unquenchable, the tongue is swollen, red and is

cracked, and covered with a dry brownish coating. The duration of this second stage may be from twelve to forty eight hours, with slight remissions.

If now the patient does not begin to improve; the third or last stage comes on. This stage is characterized by spasmodic vomiting and retching accompanied by belching up of flatulences; the matter thrown up having the appearance of coffee grounds and has been called, "Black vomit"; the severe burning in the stomach now becomes unbearable; the skin becomes of a darker hue or mahogany color; the breathing is more labored; the tongue black, dry, cracked or shrivelled; the eyes hollow and sunken; the pulse sinks and becomes intermittent, though it

Sometimes increases in frequency. A gradual aggravation of the symptoms then ensues attended with startings or twitches of the tendons; there are cramps in the legs and bowels; the limbs become cold; there is a distressing hicough; there is hemorrhage from different parts of the body; the urine is dark colored or suppressed; the discharge from the bowels is black or sanguineous; the skin becomes cold and clammy; there is low wandering delirium; the pulse flags, and becomes intermittent and irregular; sometimes convulsions set in, and death soon ends the scene.

Diagnosis

It may be difficult sometimes to throw an accustomed to this disease, to decide rightly between this, and some other disease showing the same

symptoms as in the first stage. To the "old school" practitioner, such a mistake would result in much harm, but not so much with the Homeopath, for in his prescription he would be guided by the symptoms showing themselves, and of course under no circumstance could do harm, if he should mistake it for another disease. But if the Physician of the "old school" should unfortunately for the patient, make a mistake and bleed him, the probability is he would not long have his patient to prescribe for; for he would most likely die in a very short time.

Prognosis

This disease is in general considered fatal, from the fact that so few recover when attacked. It sometimes makes its appearance in a mild

form, and but very few die; at another time it is so virulent, that in the vast majority of cases it proves fatal.

It has been proved that when the disease appears in an epidemic form, the first cases are generally the most fatal and but few recover; But towards the close of the epidemic a far less number perish. It is the opinion of Physicians and others who have lived in those latitudes, where the disease prevails, that the Irish patients are the worst cases; it being more likely to prove fatal with them than with any other nation, from the fact I presume that their habits are less cleanly; and their being more herded together than any other class of people.

Those cases are considered unfavorable when attended with violent & excruciating

pains in the head, back and limbs; great
fullness and frequency of the pulse; and
a bronze or Mahogany appearance of the
skin; a short and violent febrile stage;
Coma or Convulsions; hiccup with
excessive restlessness; Wandering delirium
with a disposition to get up out of
bed and walk; Suppression of urine;
hemorrhage from the bowels, and black
vomit.

An absence of the above symptoms
are generally considered favorable, as if
in the first stage if the fever does not
take on so high and inflammatory a
type, and when it continues longer
without a remission; a gradual
cleaning and moistening of the tongue;
the appearance of dark bilious excre-
tations, less vomiting and tenderness
of the epigastrium, and a more

natural pulse.

During the prevalence of the fever in Savannah in 1854; and whilst the citizens were becoming more and more excited, by the daily reports of deaths which had occurred the day previous. A notice was published in one of the papers, by a prominent Physician of the Old School to the effect, that he had then had some one hundred and sixty patients sick with Yellow fever. he had not lost a single case. He had prescribed Muriate Tinct. of Iron 15 drops in a wine glass of water three times a day.

The consequence was that almost every man, provided himself with a small vial of that tincture, believing he had at last found the grand specific. In less than one week the Physician himself died of Yellow fever. I believe

from taking too much of his own prescription, thinking probably, that if 15 drops would do good 30 or 50 would do better. Others, and a by far the greatest number, considered Calomel to be the remedy most proper to be used in this disease.

But nothing seemed to answer the purpose or stay the ravages of the disease. At last some of the Physicians from New Orleans made their appearance; it was hoped they would bring success with them; they banished to a great extent almost the entire use of their drugs, and prescribed what? Why, Champagne wine in large doses.

Nothing strange to relate they were more successful with that treatment, than others had been with all their specifics. Homoeopathy thus had the opportunity of proving its power

and a advantage in the hands of Drs
Schley and Banks over the much vaunted
Allopathic treatment. Their usual
plan was to prescribe the mother tincture
of Aconite and Belladonna two or three
drops in a tumbler of water, a tea
spoonful to be taken every hour until
the inflammatory stage was reduced;
other remedies were used as the
symptoms developed themselves.

There has been considerable dispute
among Physicians of the present day,
whether Yellow fever is a contagious
or non-contagious disease; by some
it is warmly contended that it is con-
tagious, by others equally as strong,
that it is not. I myself do not
pretend to decide either way when so
many more able minds differ on
the subject; but am rather inclined

from my own experience to the opinion, that it is non-contagious, from the fact that I have seen so many thrown in contact with it without being affected by the disease.

I believe those of an intemperate habit and those of a high and excitable nervous temperament who have great fear of all so called contagious diseases are more liable to contract it, than are those who dare go where it is prevailing having a feeling of security within themselves that they will not contract the disease under any circumstances.

Take for example the number of Physicians, who have attended on this disease, in New Orleans for instance where it has prevailed to so great an extent, and how seldom have we heard of one dying from that cause. It is true occasionally one does die from

that disease, but if that case were closely
inquired into, it would be found that
his system had been overtaxed with fatigues
and loss of rest; this acting as a
predisposing agent to bring on the disease.

It was generally believed by the citizens
of Savannah, that the fever had been
introduced into that city by a Spanish
vessel from Havannah. I was inclined
to think otherwise from the fact, that
the vessel had sailed sometime previous
to the appearance of the disease;
besides it commenced not where in
the neighborhood where the vessel
had been lying, but in the extreme
lower part of the city. My own
impression was, that the disease
was caused more probably by the
close connection of the rice fields
with that part where the fever

first made its appearance. There had been, and thus continued for some time afterwards a long spell of dry North East winds, which, blowing from that direction so constantly, carried the foul air from the rice fields directly through the city. We have all heard or read how deadly the Malaria from those fields, is in its effects upon the white race.

Commencing near this point, it was carried directly through the most respectable and most cleanly portion of the city, without affecting any one; and again made its appearance in the extreme opposite corner, in a direct line with this North East wind, but where very much the same class of people were residing as in the lower part. Among those

of the first cases attacked with the disease, was that of an old lady, who had been confined to her bed, and who had not been out of her room for weeks previous to the breaking out of the fever. She had become very much excited, when she heard the fever was prevailing in the city; and I believe that fear more than anything else caused her to take the disease, as I was informed, she was the first in the family, and in the immediate neighborhood who contracted the disease. It afterwards spread to all parts of the city, but was confined more particularly to the outskirts.

One of my friends who had been down sick with what he considered the fever, told me with a very grave face after his recovery, that he had

had the "Black vomit" three different times; I am much more disposed to think the "Black vomit" he had, was caused more by his taking too much of the Purgative Zinc of Iron, causing a black or dark discoloration of the contents of the stomach, which when thrown up, would have somewhat the appearance of the "Black vomit". I very much doubt if any one having the "vomit" of the last stage (as I have seen it) could possibly recover.

There is often in the second stage of the disease a dark discharge thrown from the stomach, but that is far from the "Black vomit" of the last stage.

To give another reason why I consider it non-contagious. During the height of the disease September 5th 1854 I left Savannah for Philadelphia in one of the Steamers trading between the two Ports

The vessel was loaded with cotton, one of the articles claimed by some to hold and transmit the contagion. There was on board some sixty or seventy passengers, besides a crew of forty men including officers.

We arrived at the Quarantine ground below the city on the evening of the 8th with several cases of Yellow fever on board: two of the passengers and six of the crew, having been attacked the day previous. It was too late to be boarded by the Physician, and have the sick removed that night. Of the passengers sick one was a lady (married), the other a girl fifteen years of age.

The next day the 9th, it was storming, to have to have them removed; but the following day 10th they were all removed from the vessel to the Hospital; I had personally and frequently visited three

of the passengers and crew sick, while they
were on board the vessel, also while they
were in the Hospital; I was one of two
that carried the lady from her state room
in an arm chair down into the boat; was
beside the bed when two of the crew were
dying; was sitting beside the bed of
the lady when she was taken with
the Black vomit (last stage) I was
exposed to the infection frequently and
perhaps unnecessarily; Is it con-
tagious? Why, did I not take it?

"I certainly do not know", unless
having no fear of the disease, my
nervous system was perfectly calm, so
I had a feeling of perfect security.

The two passengers, the lady and a
girl and six of the crew died, all
being sick with the fever when we arrived,
and all dying within six days

after the first symptoms of the disease.

We were ordered by the board of health to discharge all the cotton from the vessel, and have it aired, to prevent spreading the infection.

So many of the crew were sick that it became necessary to get help from the city. The Board of Health granted a permit for twenty laborers to come down to assist us in unloading the cotton. Some of these men fresh from the city, went into the hold of the vessel, where the contagion was likely to be if any where; they worked among the cotton two full days; and after finishing, were permitted to return to the city the same day; the balance of the passengers were also permitted to go. And yet I have never heard that any one, either passengers or

laborers took the disease.

I mention this fact of the laborers coming down, to show that cotton is not in my opinion, the article to carry the infection; though it is supposed so to do, by a number of Physicians, and the mass of people generally; and also to show how inconsistent the gentlemen composing the Board of Health at that time were in stopping the vessel, compelling her to be discharged for fear of the contagion, and yet permitting twenty laborers to come down to work in it; and then allowing them to return to the city, to carry and spread the disease to an untold extent, if they should by any means have contracted it on board the vessel.